

California Energy Commission
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**California Retail Fuel Outlet Survey
Annual Report
CEC Form A15 (rev. 12/7/06)**



Facility Name:			Report Year:	2006
Brand Name (if applicable):				
FACILITY ADDRESS		BUSINESS ADDRESS (if different from facility location)		
Street Number and Name:			Street Number and Name:	
City and Zip Code:			City and Zip Code:	
Normal Hours of Operation:			Telephone Number:	
Telephone Number:				

Product (See Definitions)	Product Code	Tank Information				Sales	Facility Information	
		Number of Above Ground Tanks	Total Site Capacity (Gallons)	Number of Underground Tanks	Total Site Capacity (Gallons)	Volume (Thousands of Gallons)	Ownership Designation (Check One)	
CARB RFG -- Regular Gasoline	185						<input type="checkbox"/>	Company Owned & Operated
CARB RFG -- Midgrade Gasoline	186						<input type="checkbox"/>	Company Owned - Dealer Operated
CARB RFG -- Premium Gasoline	187						<input type="checkbox"/>	Dealer Owned & Operated
CARB ULS Diesel -- No. 2 Diesel	478						<input type="checkbox"/>	Independently Owned & Operated
Bio-Diesel -- B5	487						Operational Designation (Check One)	
Bio-Diesel -- B20	488							
Bio-Diesel -- B100	489						<input type="checkbox"/>	Service Station
Marine Fuels	486						<input type="checkbox"/>	Cardlock Facility
Finished Aviation Gasoline, Leaded	115						<input type="checkbox"/>	Hypermart
Finished Aviation Gasoline, Unleaded	116						<input type="checkbox"/>	Marina
Commercial Jet Fuel	217						<input type="checkbox"/>	Airport
Propane, Consumer Grade	624						<input type="checkbox"/>	Truck Stop
E-85 (85% Ethanol Fuel)	117						<input type="checkbox"/>	Other
M-85 (85% Methanol)	118						Business Amenity Information (Check Each That Apply)	
M-100 (100% Methanol)	119							
Compressed Natural Gas (CNG)	625						<input type="checkbox"/>	Convenience Store
Liquefied Natural Gas (LNG)	626						<input type="checkbox"/>	Kiosk
Other (please describe)	N/A						<input type="checkbox"/>	Restaurant/Fast Food Outlet
							<input type="checkbox"/>	Supermarket/General Store
							<input type="checkbox"/>	Pharmacy
							<input type="checkbox"/>	Discount Store
							<input type="checkbox"/>	Automotive Repair Service Bay
							<input type="checkbox"/>	Car Wash

This report contains proprietary and trade secret information and is customarily treated as confidential by this company. The disclosure of this information would result in competitive hardship. Therefore, pursuant to Public Resources Code sections 25213, 25218(e), 25364 and Title 20, California Code of Regulations, section 1370 our company is requesting that all information submitted on this form be kept confidential. I certify under penalty of perjury that the information contained in this report is true, correct, and complete to the best of my knowledge. I am authorized to make this report on behalf of my company.

Name, Title & email address

Signature

Telephone Number

Date Filed